

# BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO.	FILING DATE					
							APPLICANT(S)						
							CLAIMS						
	AS FILE		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
2		/					52		/				
3		/					53						
4		/					54						
5		/					55						
6		/					56						
7		/					57						
8							58						
9		2					59						
10							60						
11		/					61						
12		/					62						
13		/					63						
14		/					64						
15		/					65						
16		1					66						
17							67						
18		2					68						
19		/					69						
20		1					70						
21		/					71						
22							72						
23		/					73						
24		/					74						
25		/					75						
26		/					76						
27		/					77						
28		/					78						
29		/					79						
30		/					80						
31		/					81						
32		/					82						
33							83						
34		2					84						
35		1					85						
36							86						
37		/					87						
38		/					88						
39		/					89						
40		/					90						
41		/					91						
42							92						
43		2					93						
44		1					94						
45							95						
46		/					96						
47		/					97						
48							98						
49		/					99						
50		1					100						
TOTAL IND.	12						TOTAL IND.						
TOTAL DEP.	45						TOTAL DEP.						
TOTAL CLAIMS	57						TOTAL CLAIMS						

CLAIMS ONLY							SERIAL NO.	FILING DATE
							APPLICANT(S)	

  

CLAIMS													
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51						
2		1					52		1				
3							53	1					
4							54						
5		1					55						
6							56						
7							57						
8	1						58						
9		2					59						
10	1						60						
11							61						
12							62						
13							63						
14							64						
15							65						
16							66						
17	1						67						
18		2					68						
19	1						69						
20							70						
21							71						
22	1						72						
23							73						
24							74						
25							75						
26	9						76						
27	1						77						
28							78						
29							79						
30							80						
31							81						
32							82						
33	1						83						
34		2					84						
35							85						
36	1						86						
37							87						
38							88						
39							89						
40							90						
41							91						
42	1						92						
43		2					93						
44							94						
45	1						95						
46							96						
47							97						
48	1						98						
49							99						
50							100						
TOTAL IND.		↓		↓		↓	TOTAL IND.	13	↓		↓		↓
TOTAL DEP.		←		←		←	TOTAL DEP.	48	←		←		←
TOTAL CLAIMS							TOTAL CLAIMS	57					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS